U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 73325	2. Fiscal Year Covered From:		
4.7.22			
	1 / 1 / 2004 Through: 12 / 31 / 2004		
Name and address of person filing.	4. Name, file number, and address of labor organization.		
Name Brett Mirsky	Name UA Plumbers & Pipefitters Local Union 295		
	Labor Organization File Number 039-008		
P.O. Box, Bldg. Room No., if any P.O. Box 291626	P.O. Box, Building and Room Number, if any		
Street	Street 743 North Beach Street		
City Port Orange	City Daytona Beach		
State Florida ZIP Code + 4 32129-1626	State Florida ZIP Code + 4 32114-2279		
5. Position in labor organization. Business Manager			
Enter appropriate data below If, during the past fiscal year, you or your spo (except as specified in the exclu	use or minor child directly or indirectly had any of the following interests is isions set forth in the instructions):		
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organizati	derived income or other economic benefit of on represents or is actively seeking to represent.		
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.		
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
	7.b. Amount.		
Street			
City	\$0		
State ZIP Code + 4			
Signature			
15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompany undersigned's knowledge and belief, true, correct, and complete. (See the se	ring documents), has been examined by the signatory and is, to the best of the		
11/1 mil	[7/7/2025		
Signed // //	On <u>[7/7/2005</u> 386-547-2709] Date Telephone Number		

Name of Person Filing Brett Mirsky		File Number U -	
B. Held an interest in or derived income or economic benefit with monetary val substantial part of which consists of buying from, selling or leasing to, or otherword an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	vise dealing with the business rely seeking to represent, or irectly to, or otherwise	5	
8. Name and address of Business (including trade name, if any). Name Unite: Members Insurance Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 324 Dale Mabry Highway, Suite 300 City Tampa State Florida ZIP Code + 4 33609-1267	9. Business deals with: a. Labor Organiza b. Trust c. Employer	⊭on	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such deali	ng.	
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	Insurance agency f	or Local Unions	1
Street	11.b. Approximate dollar valu	ue of such dealing.	\$5,000
City	12.a. Nature of interest hel		
State ZIP Code + 4	Received luncheon staff	·	insurance agency
	12.b. Amount.		\$25
	12.b. 7 tillodili.		1
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money			
13.a. Name and address of Employer or Labor Relations Consultant	14.a. Nature of payment.		
(including trade name, if any).			
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street			
City			
State ZIF Code + 4		dalle Bt	
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.		

Name of Person Filing Brett	Mirsky	File Number U-	

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Joirt Apprentice Education Fund	a. Labor Organization	
Trade Name, if any:	a. Labor Organization	
P.O. Box, Bklg., Room No., if any	b. Trust	
Street 743 North Beach Street	c. Employer	
City Daytona Beach		
State FL ZIP Code + 4 32114 - 2279		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Leases an employee from UA Plumber. Local Union 295	s & Pipefitters
Trade Name, if any:		1
P.O. Box, Blcg., Room No., if any		
Street		
City		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$34,000
	12.a. Nature of interest held or income received.	,
	Reimburse meeting and travel expen	ses
	12.b. Amount.	\$65

Name of Person Filing Brett	Mirsky	File Number U-

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Joirt Apprentice Education Fund	a. Labor Crganization	
Trade Name, if any:	<u> </u>	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 743 North Beach Street	c. Employer	
City Daytona Beach		
State FL ZIP Code + 4 32114-2279		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Leases an employee from UA Plumber Local Union 295	s & Pipefitters
Trade Name if any:		
P.O. Box, Bidg., Room No., if any		
Street		
City		
3-10-0		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$34,000
	12.a. Nature of interest held or income received.	
	Cash advance to attend Michigan In Training School	structors
	12.b. Amount.	\$300

Name of Person Filing Brett	Mirsky	File Number U-

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Joirt Apprentice Education Fund	a. Labor Organization	
Trade Name, if any:	(2.3)	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 743 North Beach Street	c. Employer	
City Daytona Beach		
State FL ZIP Code + 4 32114-2279		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Leases an employee from UA Plumber Local Union 295	s & Pipefitters
Trade Name, if any:		
P.O. Box, Blcg., Room No., if any		
Street		
City		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$34,000
	12.a. Nature of interest held or income received.	
	Reimburse travel expenses in exces attend Michigan Instructor Trainin	s of advance to g School
		l
	12.b. Amount.	\$198

Name of Person Filing Brett	Mirsky	File Number U-

8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name Joirt Apprentice Education Fund	a. Labor Organization
Trade Name if any:	
P.O. Box, Bldg., Room No., if any	b. Trust
	c. Employer
Street 743 North Beach Street	L_J
City Daytona Beach	
State FL ZIP Code + 4 32114-2	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name	Leases an employee from UA Plumbers & Pipefitters Local Union 295
Trade Name, if any:	
P O. Box, Bldg., Room No., if any	
Street	
City	
City	
State ZIP Code + 4	11.b. Approximate dollar value of such dealing. \$34,000
	12.a. Nature of interest held or income received.
	Reimburse travel expenses, equipment, books
	12.b. Amount. \$1,929
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Name of Person Filing Brett Mirsky File Number U-	

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Joint Apprentice Education Fund	a. Labor Organization	
Trade Name if any:		
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 743 North Beach Street	c. Employer	
City Daytona Beach		
State FL ZIP Code + 4 32114-2279		
10, If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Leases an employee from UA Plumber Local Union 295	s & Pipefitters
Trade Name if any:		
P.O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$34,000
	12.a. Nature of interest held or income received.	
	Reimburse advertising expenses, au expenses, meeting expenses, office postage	tomobile expenses and
	12 b. Amount	\$916

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Name of Person Filing Brett	Mirsky	File Number U-

8. Name and ϵ ddress of Business (including trade name, if any).	9. Business deals with:	
Name Joirt Apprentice Education Fund		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 743 North Beach Street	c. Employer	
City Daytona Beach		
State FL ZIP Code + 4 32114 - 2279		
10. If 9.b or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Leases an employee from UA Plumbers Local Union 295	s & Pipefitters
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$34,000
	12.a. Nature of interest held or income received.	
	Reimburse hotel expense while atter Instructors Trairing School	nding Michigan
	12.b. Amount.	\$2,542

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Mirsky	File Number U-	

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Joint Apprentice Education Fund	a. Labor Organization	
Trade Name if any:		
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 743 North Beach Street	c. Employer	
City Daytona Beach		
State FL ZIP Code + 4 32114-2279		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Leases an employee from UA Plumber Local Union 295	s & Pipefitters
Trade Name if any:		
P.O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$34,000
	12.a. Nature of interest held or income received.	<u> </u>
	Reimburse office expenses	
	12.b. Amount.	\$14

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Name of Person Filing Brett Mirsky	File Number U-

8. Name and address of Business (including trace name, if any).	9. Business deals with:	
Name Joint Apprentice Education Fund	a. Labor Organization	
Trade Name if any:		
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 743 North Beach Street	c. Employer	
City Daytona Beach		
State FL ZIP Code + 4 32114-2279		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Leases an employee from UA Plumbers & Local Union 295	Pipefitters
Trade Name if any:		
P.O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$34,000
	12.a. Nature of interest held or income received.	
	Reimburse consumable educational mater tools and office expenses	rials, books,
	12.b. Amount.	\$907

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Name of Person Filing Brett	Mirsky		File Number U-	

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Joint Apprentice Education Fund	a. Labor Organization	
Trade Name, if any:		
P.O. Box, Bidg., Room No., if any	b. Trust	
Street 743 North Beach Street	c. Employer	
City Daytona Beach		
State FL ZIP Code + 4 32114-2279		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Leases an employee from UA Plumber Local Union 295	s & Pipefitters
Trade Name if any:		
P.O. Box, Bldg., Room No., if any		
Street		,
City		
State Z1P Code + 4	11.b. Approximate dollar value of such dealing.	\$34,000
	12.a. Nature of interest held or income received.	
	Reimburse office expenses and JTF Expenses	Medgas Class
	12.b. Amount.	\$1,632

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Name of Person Filing Brett	Mirsky	File Number U-	

8. Name and ε.ddress of Business (including trade name, if any).	9. Business deals with:	
Name Joirt Apprentice Education Fund	a. Labor Organization	
Trade Name, if any:		
P.O. Box, Bklg., Room No., if any	b. Trust	
Street 743 North Beach Street	c. Employer	
City Daytona Beach		
State FL ZIP Code + 4 32114-2279		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Leases an employee from UA Plumber Local Union 295	s & Pipefitters
Trade Name if any:		
P.O. Box, Bklg., Room No., if any		
Street		
City		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$34,000
	12.a. Nature of interest held or income received.	
	Reimburse meeting and travel expen	ses
	12.b. Amount.	\$131

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Name of Person Filing Brett Mirsky	File Number U-

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name UA Flumbers & Pipefitters Local Union 803	a. Labor Organization	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 2447 Orlando Central Parkway	c. Employer	
City Orlando		
State Florida ZIP Code + 4 32809-5619		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Brother/Sister Local Union of UA P Pipefitters	lumbers &
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$0
	12.a. Nature of interest held or income received.	
	Received meal at Business Managers UA Plumbers & Pirefitters Local Un	
	12.b. Amount.	\$20

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Name of Person Filing Brett	Mirsky	File Number U-	

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name United Association of Journeymen and Apprent Trade Name, if any: UA Plumbers & Pipefitters P.O. Box, Bkig., Room No., if any P O Box 37800 Street City Washington State District of Columbia ZIP Code + 4 20013-4307	a. Labor Organization b. Trust c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Trade Name if any: P.O. Box, Bidg., Room No., if any Street City	Parent organization of UA Plumbers Local Union 295	& Pipefitters
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$70,000
	12.a. Nature of interest held or income received.	
	Received dinner at Business Manage in Hollywood Florida	rs meeting held
	12.b. Amount.	\$100

Name of Person Filing Brett	Mirsky	File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name HGk Asset Management, Inc.	a. Labor Organization	
Trade Name, if any:	a. Eddor organization	
P.O. Box, Blog., Room No., if any	🔀 b. Trust	
Street 19046 Bruce B. Downs Blvd	c. Employer	
City Tampa		
State Florida ZIP Code + 4 33647-2434		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Plumbers & Fitters L U 295 Pension Fund	Seeking position as investment man fund.	ager for pension
Trade Name, if any:		
P.O. Box, Blcg., Room No., if any		
Street 1000 Burr Ridge Parkway Suite 200		
City Burr Ridge		
State Illimois ZIP Code + 4 60527-0845	11.b. Approximate dollar value of such dealing.	\$0
	12.a. Nature of interest held or income received.	
	Received lunch from C. Harold Ston Marketing for HG% Asset Management	
	12.b. Amount.	\$30

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Name of Person Filing Brett Mirsky		File Number U-
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8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name OBA Midwest, Ltd.	a. Labor Organization	
Trade Name if any:	over over the control of the con	
P.O. Box, Bldg., Room No., if any	🔀 b. Trust	
Street 1000 Burr Ridge Parkway Stite 200	c. Employer	
City Burr Ridge		
State Illinois ZIP Code + 4 60527-0845		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Plumbers & Fitters L U 29! Pension Fund	Third party administrator responsible collecting and allocating contractors	or contributions,
Trade Name. if any:	administering appendant benefit fu	ids
P O. Box, Bldg., Room No., if any		
Street 1000 Burr Ridge Parkway Stite 200		
City Burr Ridge		
State Illinois ZIP Code + 4 60527-0845	11.b. Approximate dollar value of such dealing.	\$90,000
	12.a. Nature of interest held or income received.	
	Received dinner while visiting OBA headquarters in Hurr Ridge, IL from President	
	<u> </u>	
	12.b. Amount.	\$100

Name of Person Filing Brett	Mirsky	File Number U-

Name and address of Business (including trade name, if any).	9. Business deals with:	
Name OBA Midwest, Ltd.	a. Labor Organization	
Trade Name if any:	had "	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 1000 Burr Ridge Parkway SLite 200	c. Employer	
City Burr Ridge		
State Illinois ZIP Code + 4 60527-0845		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Plumbers & Fitters L U 295 Welfare Fund	Third party administrator responsit collecting and allocating contract	or contributions,
Trade Name if any:	administering appendant benefit fur	ids
P.O. Box, Bldg., Room No., if any		į
Street 1000 Burr Ridge Parkway Stite 200		Ì
City Burr Ridge		
State Illinois ZIP Code + 4 60527-0845	11.b. Approximate dollar value of such dealing.	\$90,000
	12.a. Nature of interest held or income received.	
	Received dinner while visiting OBA headquarters in Hurr Ridge, IL from President (same dinner as preceding	n Paul Hawkins,
		}
	12.b. Amount.	\$100

Name of Person Filing Brett	Mirsky	File Number U-	

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name OBA Midwest, Ltd.	a. Labor Organization	
Trade Name if any:	a. cabbi organization	
P.O. Box, Bldg., Room No., if any	[X] b. Trust	
Street 1000 Burr Ridge Parkway Stite 200	c. Employer	
City Burr Ridge		
State [Illinois ZIP Code + 4 60527-0845]		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Joirt Apprentice Education Fund	Third party administrator responsible collecting and allocating contract	or contributions,
Trade Name, if any:	administering appendant benefit fu	nas
P.O. Box, Blcg., Room No., if any		
Street 743 N. Beach Street		I
City Daytona Beach		
State Flor: da ZIP Code + 4 32114-2279	11.b. Approximate dollar value of such dealing.	\$90,000
	12.a. Nature of interest held or income received.	
	Received dinner while visiting OBA headquarters in Burr Ridge, IL from President (same dinner as preceding	m Paul Hawkins,
	Fresident (same diffier as preceding	a encry,
		ı
	12.b. Amount.	\$100

		 <u> </u>
Name of Person Filing Brett	Mirsky	File Number U-

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name OBA Midwest, Ltd. Trade Name if any: P.O. Box, Bldg., Room No., if any Street 1000 Burr Ridge Parkway Suite 200 City Burr Ridge State Florida ZIP Code + 4 60527-0845	a. Labor Organization b. Trust c. Employer	
10, If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Trade Name if any: P.O. Box, Blcg., Room No., if any Street City	Third party admiristrator responsil collecting and allocating contracte administering appendant benefit fur	or contributions,
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$90,000
	12.a. Nature of interest held or income received.	
	Received dinner while visiting OBA headquarters in Burr Ridge, IL from President (same dinner as preceding	m Paul Hawkins,
	12.b. Amount.	\$100

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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Pension Fund Evaluations, Inc.	a. Labor Organization	
Trade Name if any:	a zasor orga nzanon	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 2450 Middle Country Road, Ste 103	c. Employer	
City Centereach		
State New York ZIP Code + 4 11720-3532		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Plumbers & Fitters L U 295 Pension Fund	Performs evaluations of pension fur asset manager performance	nd investment
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street 1000 Burr Ridge Parkway Suite 200		Ì
City Burr Ridge		
State Illirois ZIP Code + 4 60527-0845	11.b. Approximate dollar value of such dealing.	\$9,500
	12.a. Nature of interest held or income received.	
	Received dinner from Greg Phillips Pension Fund Evaluations, Inc.	, President of
	12 h America	
	12.b. Amount.	\$75

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Name of Person Filing Brett	Mirsky	File Number U-	

8. Name and address of Business (include	ding trade name, if any).	9. Business deals with:	
Name WW Gay Mechanical Cont	ractors	a. Labor Organization	
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any		b. Trust	
Street 524 Stockton Street		c. Employer	
City Jacksonville			<u> </u>
State Florida	ZIP Code + 4 32204-2535		
10. If 9.b. or 9.c. is checked give trust or em	nployer's name.	11.a. Nature of such dealing.	
Name		Signatory employer	
Trade Name, if any:			
P.O. Box, Blog., Room No., if any			!
Street			
City			
State	ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$8,800
		12.a. Nature of interest held or income received.	
		Jack Poff bought lunch after visit where UA Plumbers & Pipefitters Lo members were employed	to job sight cal Union 295
		12.b. Amount.	\$10

Name of Person Filing Brett	Mirsky	File Number U-

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name WW Gay Mechanical Contractors Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 524 Stockton Street	c. Employer	
City Jacksonville		
State New York ZIP Code + 4 32204-2535		
10. 'f 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Signatory employer	
Trade Name, if any:		
P O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$8,800
	12.a. Nature of interest held or income received.	
	Terry Shephard Lought lunch after sight where UA Local Union 295 mem employed	
	12.b. Amount.	\$10

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